

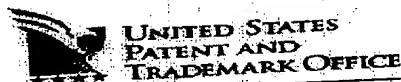
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FASSE PATENT ATTYS

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Page 1 of 2 #5

Commissioner for Patents
Washington, DC 20231
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/810,283	03/16/2001	1771	355	3985	1	18	1

021553
FASSE PATENT ATTORNEYS, P.A.
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FASSE PATENT ATTORNEYS

2nd CONFIRMATION NO. 5921
CORRECTED FILING RECEIPT

OC000000009127015

Date Mailed: 11/19/2002

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Rolf Espe, Bochum, GERMANY; ✓

Domestic Priority data as claimed by applicant

Foreign Applications

GERMANY 200 05 255.1 03/21/2000 ✓
GERMANY 200 08 249.3 05/11/2000 ✓

If Required, Foreign Filing License Granted 04/23/2001

Projected Publication Date: Not Applicable

Non-Publication Request: No

Early Publication Request: No

Small Entity

Title

Press pad containing fluoroelastomer or fluorosilicone elastomer

Preliminary Class

442

BY TELEFAX 703-746-9195

DOCKET NO.: 3985

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN THE MATTER OF THE APPLICATION FOR PATENT

OF: Rolf ESPE

| ART UNIT: 1771

SERIAL NO.: 09/810,283

| CONF. NO.: 5921

FILED: March 16, 2001

FOR: PRESS PAD CONTAINING FLUOROELASTOMER OR FLUOROSILICONE
ELASTOMERASSISTANT COMMISSIONER FOR PATENTS
BOX PCT, ATTN. PATRICIA BOOKER
WASHINGTON, D.C. 20231

December 3, 2002

REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Dear Sir:

- 1) The Official Filing Receipt contains **an error**. Please correct the following item(s) as shown on the enclosed marked-up copy of the Filing Receipt:

● **SMALL ENTITY**

- 2) The requested correction is supported by the claim for Small Entity Status at filing on: **March 16, 2001**.
- 3) Please issue a corrected Filing Receipt.

Respectfully submitted,
Rolf Espe - Applicant

WFF:he/3985

Enclosure:
Hand-corrected
copy of OFRBy Walter F. Fasse
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P.O. Box 726, Hampden, ME 04444-0726CERTIFICATE OF FAX TRANSMISSION:

I hereby certify that this correspondence with all indicated enclosures is being transmitted by telefax to 703-746-9195 on the date indicated below, and is addressed to: Assistant Commissioner for Patents, Washington, D. C. 20231.

M. Hellwig-Hill Dec 3, 02
Name: Maren Hellwig-Hill - Date: December 3, 2002

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Bib Data Sheet

CONFIRMATION NO. 5921

SERIAL NUMBER 09/810,283	FILING DATE 03/16/2001 RULE	CLASS 442	GROUP ART UNIT 1771	ATTORNEY DOCKET NO. 3985
APPLICANTS Rolf Espe, Bochum, GERMANY;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** GERMANY 200 05 255.1 03/21/2000 GERMANY 200 08 249.3 05/12/2000				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 04/23/2001				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	STATE OR COUNTRY GERMANY	SHEETS DRAWING 1	TOTAL CLAIMS 18
INDEPENDENT CLAIMS 1				
ADDRESS 021553				
TITLE Press pad containing fluoroelastomer or fluorosilicone elastomer				
FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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